

# BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/596641

### CLAIMS AS FILED - PART I

|                                  | (Column 1)   | (Column 2)                                |
|----------------------------------|--|---|
| U.S. NATIONAL STAGE FEES         |  |   |
| BASIC FEE                        | SMALL ENT. = \$ 150  | LARGE ENT. = \$ 300                       |
| EXAMINATION FEE                  | Satisfies PCT Article 33(1)-<br>(4) = \$ 50 / \$ 100                     | All other situations =<br>\$ 100 / \$ 200 |
| SEARCH FEE                       | U.S. Is ISA = \$ 60 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 | All other situations =<br>\$ 250 / \$ 600 |
| FEES FOR EXTRA SPEC. PGS.        | 55 minus 100 =   | 150 =                                     |
| TOTAL CHARGEABLE CLAIMS          | 18 minus 20 =  | *   |
| INDEPENDENT CLAIMS               | 4 minus 3 =  | *   |
| MULTIPLE DEPENDENT CLAIM PRESENT |  | <input type="checkbox"/>                  |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OR  | OTHER THAN SMALL ENTITY |     |
|-------------------|-----|-------------------------|-----|
| RATE              | Fee | RATE                    |     |
| BASIC FEE         |     | BASIC FEE               | 300 |
| EXAM. FEE         |     | EXAM. FEE               | 200 |
| SEARCH FEE        |     | SEARCH FEE              | 400 |
| X \$ 125 =        |     | X \$ 250 =              |     |
| X \$ 25 =         |     | X \$ 50 =               |     |
| X \$ 100 =        |     | X \$ 200 =              |     |
| + \$ 180 =        |     | + \$ 360 =              |     |
| TOTAL             |     | TOTAL                   | 700 |

### CLAIMS AS AMENDED - PART II

| AMENDMENT A                                    |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | (Column 1) | (Column 2)     | (Column 3) |
|--|---|----------------------------------|-------|------------------------------------|---------------|------------|----------------|------------|
|  |   |                                  |       |                                    |               | RATE       | ADDITIONAL FEE |            |
| Total  | * |                                  | Minus | **                                 | =             | X \$ 25 =  |                |            |
| Independent                                    | * |                                  | Minus | ***                                | =             | X \$ 100 = |                |            |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |       |                                    |               |            |                |            |

| SMALL ENTITY     | OR             | OTHER THAN SMALL ENTITY |  |
|------------------|----------------|-------------------------|--|
| RATE             | ADDITIONAL FEE | RATE                    |  |
| X \$ 25 =        |                | X \$ 50 =               |  |
| X \$ 100 =       |                | X \$ 200 =              |  |
| + \$ 180 =       |                | + \$ 360 =              |  |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE        |  |

| AMENDMENT B                                    |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | (Column 1) | (Column 2)     | (Column 3) |
|--|---|----------------------------------|-------|------------------------------------|---------------|------------|----------------|------------|
|  |   |                                  |       |                                    |               | RATE       | ADDITIONAL FEE |            |
| Total  | * |                                  | Minus | **                                 | =             | X \$ 25 =  |                |            |
| Independent                                    | * |                                  | Minus | ***                                | =             | X \$ 100 = |                |            |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |       |                                    |               |            |                |            |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.